

08/11/00
JC883 U.S. PTO

Please type a plus sign (+) inside the box →

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

08-14-00
PTO/SB/05 (12/97)
Approved for use through 09/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.63(b))

Attorney Docket No. Beiersdorf 630- Total Pages

First Named Inventor or Application Identifier

Axel Burmeister, Et Al.

Express Mail Label No. EH976287541US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets <input type="checkbox"/> 1]	8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
4. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) (Note Box 6 below) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	10. <input type="checkbox"/> English Translation Document (if applicable)
	11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
	12. <input checked="" type="checkbox"/> Preliminary Amendment
	13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
	14. <input type="checkbox"/> Small Entity Statement filed in prior application, Statement(s) <input type="checkbox"/> Status still proper and desired
	15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
	16. <input checked="" type="checkbox"/> Other: ... Appendix.....

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label or Correspondence address below
(If not on Customer No. or Attach Bar Code Label here)

NAME	KURT G. BRISCOE, ESO. NORRIS, McLAUGHLIN & MARCUS, P.A.				
ADDRESS	660 White Plains Road				
CITY	Tarrytown	STATE	New York	ZIP CODE	10591-1544
COUNTRY	United States	TELEPHONE	914-332-1700	FAX	914-332-1844

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Beiersdorf 630-KGB/ja
Axel Burmeister, Et Al.

APPENDIX

“Express Mail” Mailing Label No. EH976287541US

Date of Deposit August 11, 2000

jc882 U.S. PTO
09/636781
08/11/00

I hereby certify that this paper or fee is being deposited with the United States Postal Service
“Express Mail Post Office to Addressee” service under 37 CFR 1.10 on the date indicated above
and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231 Box PCT.

NORRIS, McLAUGHLIN & MARCUS
660 White Plains Road
Tarrytown, NY 10591-5144
(914) 332-1700

By: Jennifer A. Ach